

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000042078

1. Entity Name

CDEYES INTERACTIVE INC.

**FILED**  
**Feb 16, 2001 8:00 am**  
**Secretary of State**

02-16-2001 90019 020 \*\*\*150.00

Principal Place of Business

7746 VILLA NOVA DR. N.  
BOCA RATON FL 33433

Mailing Address

7746 VILLA NOVA DR. N.  
BOCA RATON FL 33433

2. Principal Place of Business

134 NW 116<sup>th</sup> Street

Suite, Apt. #, etc.

Suite 4

3. Mailing Address

134 NW 116<sup>th</sup> Street

Suite, Apt. #, etc.

Suite 4

City & State

Boca Raton, FL

City & State

Boca Raton, FL

Zip

33432

Country

PBC

Zip

33432

Country

PBC



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0833972

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BRYANT, DANE A

7746 VILLA NOVA DR. N.  
BOCA RATON FL 33433

7. Name and Address of New Registered Agent

Name

BRYANT, DANE A

Street Address (P.O. Box Number is Not Acceptable)

9469 Aegean Dr.

City

BOCA RATON

FL

Zip Code

33496  
~~33432~~

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

*Dane A. Bryant*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/3/01

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME P  
STREET ADDRESS BRYANT, DANE  
CITY-ST-ZIP 7746 VILLA NOVA DRIVE NORTH  
BOCA RATON FL 33433

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Dane A. Bryant*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/3/01

DATE

561-447-6744

DAYTIME PHONE #

CR2E034 (10/00)

0305755